RECEIVED CHARLOTTE, N.C.

CHARLOTTE, N. C.

JUL 26 2005

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF NORTH CAROLINA

AUG 9 2005

Clerk, U.S. Dist. Court W. Dist. of N. C.

CHARLOTTE DIVISION

U. S. DISTRICT COURT W. DIST. OF N. C.

	W. DISI. OF IV
UNITED STATES OF AMERICA)
Plaintiff,)
)
\mathbf{v} .) CASE NO. 3:97CV137-MCK
) (Financial Litigation Unit)
TERESA MAE MCGEE,	
Defendant(s),	
and	
WACHOVIA BANK C/O FRICK COMPANY,)
Garnishee.)
)

WRIT OF CONTINUING GARNISHMENT

GREETINGS TO:

Wachovia Bank c/o Frick Company

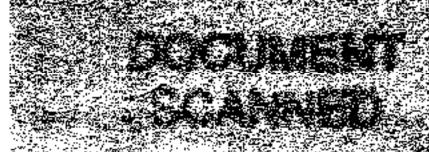
PO Box 283

St. Louis, MO 63166-0283 Attn: Darryl Matthews

An Application for a Writ of Garnishment against property of Teresa Mae McGee, defendant/debtor, has been filed with this Court. A judgment has been entered against the defendant/debtor. The current total amount of \$6,542.82, which includes the principal amount of \$6,485.35, and interest at the rate of 5.391% and in the amount of \$57.47 computed through July 22, 2005, plus \$.00 in costs is due and owing.

You, as Garnishee, are required by law to answer in writing, under oath, within ten (10) days of service of this Writ, whether or not you have in your custody, control or possession, any property, or funds owned by the debtor, including non-exempt, disposable earnings.

You must withhold and retain any property in which the defendant/debtor has a substantial non-exempt interest and for which you are or may become indebted to the defendant/debtor pending further order of the court. This means that you should withhold 25% of the defendant/debtor's



earnings which remain after all deductions required by law have been withheld and 100% of all 1099 payments. See 15 U.S.C. §1673(a).

Please state whether or not you anticipate paying the debtor any future payments and whether such payments are weekly, bi-weekly, monthly, annually or bi-annually.

You must file the original written Answer to this Writ within ten (10) days of your receipt of this Writ with the following office:

Clerk of the United States District Court
401 West Trade Street
Charlotte, NC 28202

Additionally, you are required by law to serve a copy of the Answer upon the Defendant/debtor at his/her last known address:

Teresa Mae McGee 4554 Rainbow Dr. Kannapolis, NC 28081

You are also required to serve a copy of the Answer upon the Plaintiff at the following address:

Jennifer A. Youngs, Assistant United States Attorney
United States Attorney's Office
Financial Litigation Unit
227 West Trade Street, Suite 1650
Charlotte, NC 28202

Under the law, there is property which may be exempt from this Writ of Garnishment.

Property which is exempt and which is not subject to this order may be listed on the attached Claim for Exemption form.

Pursuant to 15 U.S.C. §1674, you, the Garnishee, are prohibited from discharging the defendant/debtor from employment by reason of the fact that his earnings have been subject to

garnishment for any one indebtedness.

Pursuant to 28 U.S.C. §3205(c)(6), if you fail to answer this writ or withhold property or funds in accordance with this writ, the United States of America may petition the court for an order requiring you to appear before the court to answer the Writ and to withhold property before the appearance date. If you fail to appear, or do appear and fail to show good cause why you failed to comply with this Writ, the court shall enter a judgment against you for the value of the defendant/debtor's non-exempt interest in such property. The court may award a reasonable attorney's fee to the United States and against you if the Writ is not answered within the time specified. It is unlawful to pay or deliver to the defendant/debtor any item attached by this Writ.

This the Ch day of august, 2005.

UNITED STATES MAGISTRATE JUDGE

CLAIM FOR EXEMPTION FORM

You can claim Federal exemptions by checking items (a) through (l), pursuant to 11 U.S.C. §522(d) or you can claim exemptions under North Carolina State Law by using the attached NC State Form AOC_CV-407 Motion to Claim Exempt Property.

AOC_CV-407 Motio	on to Cia	im Exempt Property.
Federal Exen	nptions.	
	(a)	\$18,450 of equity in your residence.
	(b)	\$2,950 of equity in a motor vehicle.
	(c)	Jewelry worth up to \$1,225.
	(d)	Personal property worth up to \$9,850. (However, no single item worth more than \$475 can be claimed as exempt.)
	(e)	Property totaling up to \$975 in value, plus up to \$9,250 of any unused amount of the exemption provided in number 11(a) above.
	(f)	\$1,850 of equity in professional books, implements or tools, of your trade or your dependant's trade.
	(g)	Any unmatured life insurance contract you own, other than credit life insurance.
	(h)	The aggregate value, up to \$9,850, of any accrued dividend or interest under, or loan value of, any unmatured life insurance contract you own, but only if you are the insured or you are a dependant of the insured.
	(i)	Professionally prescribed health aids for you or your dependants.
	(j)	Unemployment compensation benefits, local public assistance benefits, disability benefits, illness benefits; and alimony, support, and separate maintenance, to the extent these items are reasonably necessary for your support or the support of your dependants.
	(k)	A payment under a stock bonus, pension, profit-sharing, annuity, or similar plan or contract on account of illness, disability, death, age, or length of service, to the extent reasonably necessary for your support or the support of your dependants, subject to the limitations set forth at Title 11 United States Code Section 522(d)(10)(E)(i)-(iii).

- (1) Your right to receive, or property that is traceable to,
 - an award under a crime victim's reparation law;
 - a payment on account of the wrongful death of an individual of whom you were a dependant, but only to the extent reasonably necessary for your support or the support of your dependants;
 - a payment under a life insurance contract that insured an individual of whom you were a dependant on the date of the insured's death, but only to the extent reasonably necessary for your support or the support of your dependants;
 - a payment, not to exceed \$18,450, on account of personal bodily injury suffered by you or by an individual of whom you are a dependant; however, payment for pain and suffering or payment to compensate actual pecuniary loss are not exempt under this paragraph;
 - a payment in compensation of loss of your future earnings or the future earnings of an individual of whom you are, or were, a dependant, but only to the extent reasonably necessary for your support or the support of your dependants.

(TYPE OR PRINT IN BLACK INK)		·	File No.		Abstract No.
STATE OF NORTH CAROLI	NA	Ju	idgment Docket Boo	k And Page No.	
	4				
Coun	ty				I Court Of Justice perior Court Division
lame Of Judgment Creditor (Plaintiff)			MOTI	ON TO CLA	184
VEDOUG				ON TO CLA	
VERSUS Vame Of Judgment Debtor (Defendant)				PT PROPE	
	•		(SIAIUIC	RY EXEMP	G.S. 1C-1603(c
I, the undersigned, move to set aside th	e property claim	ed below as ex	empt.		
1. I am a citizen and resident of					
2. a. I am married to				·	
□ b. I am not married.					
3. My current address is					
4. The following persons are dependent		port:	,		
Name(s) Of Person(s) Depender	nt On Me	Age		Relations	hip
· · · · · · · · · · · · · · · · · · ·					
					· · · · · · · · · · · · · · · · · · ·
·					
5. I wish to claim as exempt (keep from a residence. I also wish to claim my that my total interest claimed in the	y interest in the f	following burial	plots for mysel	f or my depen	
Street Address Of Residence			THE CAUCAL OF T		<u> </u>
County Where Property Located	Township		No B	Which Tay Assas	sor Identifies Property
County Where Property Located	· · · · · · · · · · · · · · · · · · ·		740. 1	y minon rax Asses.	sor recinines r reporty
Legal Description (Attach a copy of your deed or other instr	ument of conveyance o	or describe property in	as much detail as pe	ossible. Attach addi	tional sheets if necessary.)
·					
·					
Name(s) Of Owner(s) Of Record Of Residence	<u> </u>		······································		lue Of Residence (What You uld Sell It For)
•				\$	r
Amount Of Lien(s) And Name((How much money is ow				Curre	nt Amount Owed
			<u></u>	\$	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			C	
Location Of Burial Plots Claimed				Value Of Buris	al Plots Claimed
				\$	
NOTE TO DEBTOR (DEFENDANT): The Cie attorney	-	cannot fill out this	form for you. If yo	ou need assistand	e, you should talk with an

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	•			
•				
,				

6. I wish to claim the following personal property consisting of household furnishings, household goods, wearing apparel, appliances, books, animals, crops or musical instruments as exempt from the claims of my creditors (in other words, keep them from being taken from me). These items of personal property are held primarily for my personal, family or household use.

I understand that I am entitled to personal property worth the sum of \$3,500.00. I understand I am also entitled to an additional \$750.00 for each person dependent upon me for support, but not to exceed \$3,000.00 for dependents. I further understand that I am entitled to this amount after deducting from the value of the property the amount of any valid lien or security interest. Property purchased within ninety (90) days of this proceeding is not exempt. (Some examples of household goods would be TV, appliances, furniture, clothing, radios, record players.)

Item Of Property	Fair Market Value (What You Could Sell It For)	Amount Of Lien Or Security Interest (Amount Owed On Property)	Name(s) Of Lienholder(s) (To Whom Money Is Owed)	Value Of Debtor's (Defendant's) Interest (Fair Market Value Less Amount Owed)	
	\$	\$		\$	
	\$	\$		\$	
	\$	\$		\$	

7. I wish to claim my interest in the following motor vehicle as exempt from the claims of my creditors. I understand that I am entitled to my interest in one motor vehicle worth the sum of \$1,500.00 after deduction of any valid liens or security interests. I understand that a motor vehicle purchased within ninety (90) days of this proceeding is not exempt.

Make And Model	Year	Name Of Title Owner Of Record
	·	
Fair Market Value (What You Could Sell it Fo	r)	Name Of Lienholder(s) Of Record (Person(s) To Whom Money Is Owed)
\$		
Amount Of Liens (Amount Owed)		Value Of Debtor's (Defendant's) Interest (Fair Market Value Less Amount Owed)
\$		\$

8. (This item is to claim any other property you own that you wish to exempt.) I wish to claim the following property as exempt because I claimed residential or real property as exempt that is worth less than \$3,500.00, or I made no claim for a residential exemption under section (5) above. I understand that I am entitled to \$3,500.00 in any property only if I made no claim under section (5) above and that if I make a claim under section (5), that I am entitled to \$3,500.00 in any property minus any amount I claimed under section (5). (Examples: claim of \$1,000.00 under section (5), \$2,500.00 allowed here; claim of \$3,600.00 under section (5), no claim under section (5), \$3,500.00 in any property allowed here.) I further understand that the amount of my claim under this section is after the deduction from the value of this property of the amount of any valid lien or security interests and that tangible personal property purchased within ninety (90) days of this proceeding is not exempt.

Item Of Personal Property Claimed	Fair Market Value	Amount Of Lien(s)	Name(s) Of Lienholder(s)	Value Of Debtor's (Defendant's) Interest
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$

Real Property Claimed (I understand that if I wish to claim more than one parcel, I must attach additional pages setting forth the following information for each parcel claimed as exempt.)

Street Address		Estimated Value Of Property (What You Could Sell It For)
•	•	\$
County Where Property Located	Township	No. By Which Tax Assessor Identifies Property
Description (Attach a copy of your deed or o	ther instrument of conveyance or describe the p	roperty in as much detail as possible.)

Name And Address Of Lienholder	Current Amount Owed
	\$
Name And Address Of Lienholder	Current Amount Owed
	\$

(Attach additional sheets for more lienholders.)

	VERSUS		File No.			Abstract No.
Name	Of Judgment Creditor (Plaintiff)	· · · · · · · · · · · · · · · · · · ·	Judgment Docket Book And Page No.			
9.	I wish to claim the following items o	f health care aid necessary	for m	/self my der	nendents (who	eelchairs, hearing aids, etc.)
· · · ·	Item	Theater care ala necessary		Purpose		oordinana, mouning area, ordin
			· · · · · · · · · · · · · · · · · · ·			
	. <u></u> .	: :				· · · · · · · · · · · · · · · · · · ·
	······································					
10.	I wish to claim the following implem dependent. I understand such prop					
		Estimated Va		\$ # dt 4	D	· · · · · · · · · · · · · · · · · · ·
	<u>ltem</u>	(What You Could Se	ell It For)	wnat.	Business C	r Trade Used In
<u> </u>		Φ				· · · · · · · · · · · · · · · · · · ·
		3				· · · · · · · · · · · · · · · · · · ·
<u> </u>	· · · · · · · · · · · · · · · · · · ·	1 \$				
11.	I wish to claim the following life insu	rance policies whose sole	beneficiaries a	e my spouse ar	nd/or my chi	dren as exempt.
<u> </u>	Name Of Insurer	Policy Num	ber	·· ··	Benefici	ary(ies)
				·		·
	was dependent for support or comp understand that this compensation related to the accident or injury whi	is not exempt from claims to characteristic resulted in the payment	for funeral, lega of the compens	I, medical, denta ation to me.	al, hospital c	r health care charges
	nt Of Compensation	lethod Of Payment Lump Sum Or I	nstallments (If Insta	llments, State Amou	int, Frequency A	And Duration Of Payments)
\$ Locati	on Of Compensation					
12	Luich to claim my individual ratiron	ant accounts and individue	l rotiromant an	ouition (IDAIn) th	act are listed	l halaw
13.	I wish to claim my individual retirem Name Of Custodian Of IRA Account	Terr accounts and mulvidua	ii retii emem an	Account Number	iai are iisteu	Delow.
14.	The following is a complete list of p	ersons or businesses that	have judgments	for money aga	inst me.	
15.	The following is a complete listing of	of my property which I do N	OT claim as ex	empt,		
· · · · · · · · · · · · · · · · · · ·	item		ocation		E	stimated Value
ļ .					\$	· · · · · · · · · · · · · · · · · · ·
		<u> </u>		<u></u>	\$	·
					\$	
16.	I certify that the above statements a	are true.			-	
Date			Signature Of Judgr	nent Debtor/Attomey	/ For Debtor (De	efendant)
17.	A copy of this Motion was served of personally delivering a copy to attorney depositing a copy of judgment creditor (plaintiff) at the aca post-paid properly addressed envaddress:	this Motion in a post-paid p	roperly address of rights serve	ed envelope in d on me.	a post office epositing a c	the judgment creditor's , addressed to the copy of this motion in
Date		· , , , , , , , , , , , , , , , , , , ,	Address And Phon	e Number Of Attorne	ey For Debtor (E	Defendant)
Signat	ure Of Judgment Debtor/Attorney For Debtor (L	Defendant)				
	CV/407 Page 2 of 2 Pay 0/02		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·

AOC-CV-407, Page 3 of 3, Rev. 9/03 © 2003 Administrative Office of the Courts